

HPV VACCINE AND HPV-RELATED DISEASES:

A COMMUNICATION GUIDE TO SUPPORT PHARMACISTS TO START CONVERSATIONS WITH CONSUMERS

This communication guide will be a concise resource to help pharmacists engage individuals and their caregivers in informed discussions about HPV-related diseases and the benefits of HPV vaccination. It aims to address common concerns, provide evidence-based information, and guide pharmacists in promoting HPV vaccination effectively.

1. START WITH A GENERAL QUESTION

- "Have you heard of HPV?"
- "Are you familiar with the HPV vaccine?"
- "Did you know that HPV is thought to be responsible for more than 90% of anal and cervical cancers, about 70% of vaginal and vulvar cancers, and 60% of penile cancers?"¹

These initial questions will help gauge the individual's awareness and create an opportunity for dialogue.



3. PROVIDE FACTS TO GENERATE INTEREST

• *What is HPV and its health impacts?*

- Human papillomavirus (HPV) refers to a group of over 200 known viruses.
- HPV is a common sexually transmitted infection, affecting nearly **90% of sexually active individuals** at some point in their lives.³
- Some strains cause common warts on different parts of the body such as on hands or feet, whilst more than 40 strains of the virus are capable of infecting the genital areas of men and women.
- HPV types are classified as either "non-oncogenic" (wart-causing) or "oncogenic" (cancer-causing). **Thirteen HPV types** are linked to cancers of the cervix, vulva, vagina, penis, anus, and certain head and neck areas, especially the oropharynx (throat, tongue base, and tonsils). The types that cause genital warts do not cause cancer.⁴
- HPV infection is responsible for nearly all cases of cervical cancer. Approximately 70% of cervical cancers are caused by HPV types 16 and 18.⁴

• *When do HPV symptoms typically appear?*

- Most HPV infections are asymptomatic and resolve on their own, but persistent high-risk infections can cause genital warts and cancers of the cervix, anus, vulva, penis, and oropharynx.⁵

2. USE SOP TECHNIQUE FOR BUILDING VACCINE CONFIDENCE

• **S - STRONG Recommendation**

Make a strong, clear recommendation in favour of vaccination. Emphasise the significant benefits and crucial importance of vaccines for individual and public health.²

• **O - OPEN Dialogue**

Engage in open, non-judgmental conversations. Listen attentively to concerns and questions about vaccines and create a safe space for discussion without criticism.²

• **P - PRESUMPTIVE Communication**

Use a presumptive style when discussing vaccination. Present recommendations as statements rather than questions, implying that vaccination is the expected course of action.²



- Genital warts may appear within weeks, while cancers can take 10–20 years to develop.⁵
- HPV vaccines can help protect against the strains most likely to cause genital warts or cervical cancer.⁵

• *How is HPV transmitted?*

- HPV is mainly transmitted through direct skin-to-skin contact, especially during sexual activities (genital, oral-genital, and anal contact). It can also spread through hand-to-genital contact and, rarely, contaminated objects.⁶
- In rare cases, pregnant women may pass HPV to their babies during delivery, and HPV can cause cervical changes that require monitoring.⁴



4. HPV VACCINE ESSENTIALS AND KEY MESSAGING FOR PATIENTS

• *Who should get vaccinated?*

The HPV vaccine is recommended for everyone, regardless of sex or gender, ideally before sexual activity begins, to maximise protection against HPV.⁵ The vaccine is most effective when administered before exposure to HPV, as it does not treat existing infections. Consult your healthcare provider for personalised advice based on your sexual history.

Children: Ideally administered at ages 11–12, with the option to start as early as age 9.⁷

Young adults: Recommended for those up to age 26 who have not been vaccinated.⁷

Adults: Adults aged 27–45 may consider vaccination based on individual risk factors, in consultation with a healthcare provider.⁷

Special populations: Individuals with weakened immune systems, including those with HIV, should follow a tailored vaccination schedule, typically involving three doses for optimal protection.⁷

Importantly, the vaccine is not recommended for pregnant women. If a woman becomes pregnant during the vaccination series, the remaining doses should be postponed until after pregnancy.⁷

• *Is the vaccine safe and effective?*

- The vaccine has been extensively studied and proven safe and effective, with over 270 million doses distributed globally since 2006.³
- It is highly effective, preventing over 90% of HPV-related cancers when given before exposure.²
- It has led to an 88% reduction in HPV infections among teen girls and an 81% reduction among young adult women.⁸
- There has been a significant decrease in cases of genital warts, underscoring the vaccine's effectiveness.⁸
- The most common side effects are mild, such as pain, redness, or swelling at the injection site.⁸

• *How does the vaccine work?*

The HPV vaccine stimulates the immune system to produce antibodies against HPV using virus-like particles that mimic the virus without causing infection, creating a strong immune response to prevent future infections.



5. ADDRESS MISCONCEPTIONS ABOUT HPV



“Only women can get HPV.”



FACT: Both men and women can be infected with HPV.⁹



“People with HPV always show symptoms.”



FACT: Most people with HPV have no symptoms.⁹



“You must have sexual intercourse to get HPV.”



FACT: HPV spreads through intimate skin-to-skin contact, not just sexual intercourse.⁹



“Condoms fully protect against HPV.”



FACT: Condoms reduce the risk but do not provide full protection against HPV.⁹



“The HPV vaccine has dangerous side effects.”



FACT: The HPV vaccine is safe; side effects are usually mild.⁹



“The vaccine is only for sexually active people.”



FACT: The vaccine is most effective when given before sexual activity begins.⁹



“The vaccine causes infertility.”



FACT: Research shows no link between the HPV vaccine and infertility.⁹

6. PRACTICE STEPS FOR PATIENTS TO GET VACCINATED

Direct patients to nearby vaccination services, including in-pharmacy options if available.



7. ENCOURAGING FOLLOW-UP AND FURTHER QUESTIONS

Invite patients to return for follow-up questions or more information to ensure they feel supported throughout their vaccination journey.



8. REFERENCES AND RESOURCES FOR PHARMACISTS

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